

BUILDING PERMIT APPLICATION

IMPORTANT – Complete ALL items. Mark boxes where applicable.

I. LOCATION OF BUILDING

Number & Street	Subdivision	Lot	Block	Zoning
Parcel ID Number	Section	Township	Range	

II. TYPE AND COST OF BUILDING - All applicants complete Parts A - E

<p>A. TYPE OF IMPROVEMENT</p> <p>1. <input type="checkbox"/> New Building</p> <p>2. <input type="checkbox"/> Addition (if residential, enter number of new housing units added, if any, in Part D, 13)</p> <p>3. <input type="checkbox"/> Alteration (See 2 above)</p> <p>4. <input type="checkbox"/> Repair, replacement</p> <p>5. <input type="checkbox"/> Demolition (If multifamily residential, enter number of units in building in Part D, 13)</p> <p>6. <input type="checkbox"/> Moving (relocation)</p> <p>7. <input type="checkbox"/> Foundation only</p>	<p>D. PROPOSED USE – For “Demolition”, most recent use:</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><i>Residential</i></p> <p>12. <input type="checkbox"/> One family</p> <p>13. <input type="checkbox"/> Two or more family – Enter Number of units here _____</p> <p>14. <input type="checkbox"/> Transient hotel, motel or dormitory – Enter number of units here _____</p> <p>15. <input type="checkbox"/> Garage</p> <p>16. <input type="checkbox"/> Carport</p> <p>17. <input type="checkbox"/> Other...Specify _____</p> </td> <td style="width: 50%; vertical-align: top;"> <p><i>Non-Residential</i></p> <p>18. <input type="checkbox"/> Amusement, recreational</p> <p>19. <input type="checkbox"/> Church, other religious</p> <p>20. <input type="checkbox"/> Industrial</p> <p>21. <input type="checkbox"/> Parking Garage</p> <p>22. <input type="checkbox"/> Service Station, repair garage</p> <p>23. <input type="checkbox"/> Hospital, Institutional</p> <p>24. <input type="checkbox"/> Office, bank, professional</p> <p>25. <input type="checkbox"/> Public utility</p> <p>26. <input type="checkbox"/> School, library, other educational</p> <p>27. <input type="checkbox"/> Stores, mercantile</p> <p>28. <input type="checkbox"/> Tanks, towers</p> <p>29. <input type="checkbox"/> Other – specify _____</p> </td> </tr> </table>	<p><i>Residential</i></p> <p>12. <input type="checkbox"/> One family</p> <p>13. <input type="checkbox"/> Two or more family – Enter Number of units here _____</p> <p>14. <input type="checkbox"/> Transient hotel, motel or dormitory – Enter number of units here _____</p> <p>15. <input type="checkbox"/> Garage</p> <p>16. <input type="checkbox"/> Carport</p> <p>17. <input type="checkbox"/> Other...Specify _____</p>	<p><i>Non-Residential</i></p> <p>18. <input type="checkbox"/> Amusement, recreational</p> <p>19. <input type="checkbox"/> Church, other religious</p> <p>20. <input type="checkbox"/> Industrial</p> <p>21. <input type="checkbox"/> Parking Garage</p> <p>22. <input type="checkbox"/> Service Station, repair garage</p> <p>23. <input type="checkbox"/> Hospital, Institutional</p> <p>24. <input type="checkbox"/> Office, bank, professional</p> <p>25. <input type="checkbox"/> Public utility</p> <p>26. <input type="checkbox"/> School, library, other educational</p> <p>27. <input type="checkbox"/> Stores, mercantile</p> <p>28. <input type="checkbox"/> Tanks, towers</p> <p>29. <input type="checkbox"/> Other – specify _____</p>
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FOR NON-RESIDENTIAL ONLY: State of Alabama Construction Industry Craft Training (CICT) Fee (\$1.00 per \$1,000):

Total Construction Cost: _____

<p>B. OWNERSHIP</p> <p>8. <input type="checkbox"/> Private (individual, corporation non-profit institution, etc.)</p> <p>9. <input type="checkbox"/> Public (Federal, St. or local gov.)</p>	<p>E. IS THE PROPOSED CONSTRUCTION OR DEVELOPMENT IN A SPECIAL FLOOD HAZARD AREA? YES _____ NO _____</p> <p>If yes, complete an Application for Permit to Develop in a Special Flood Hazard area.</p>
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<p>C. COST</p> <p>10. <input type="checkbox"/> Cost of improvement. To be installed but not included in the above cost.</p> <p style="margin-left: 20px;">a. Electrical</p> <p style="margin-left: 20px;">b. Plumbing</p> <p style="margin-left: 20px;">c. Heating, air conditioning.</p> <p style="margin-left: 20px;">d. Other (elevator, etc.).</p> <p>11. TOTAL COST OF IMPROVEMENT \$ _____</p>	<p>Omit Cents</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Describe in detail work being permitted:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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III. SELECTED CHARACTERISTICS OF BUILDING –
For new buildings and additions, complete Parts E – L; for Demo complete only Part J; for all others, skip to IV.

<p>F. PRINCIPAL TYPE OF FRAME</p> <p>30. <input type="checkbox"/> Masonry (wall bearing)</p> <p>31. <input type="checkbox"/> Wood Frame</p> <p>32. <input type="checkbox"/> Structural steel</p> <p>33. <input type="checkbox"/> Reinforced concrete</p> <p>34. <input type="checkbox"/> Other – Specify _____</p>	<p>I. TYPE OF WATER SUPPLY</p> <p>40. <input type="checkbox"/> Public or private company</p> <p>41. <input type="checkbox"/> Individual (well, cistern)</p>	<p>L. DIMENSIONS</p> <p>46. Number of stories. _____</p> <p>47. Total square feet of floor area, all floors, based on exterior dimensions. _____</p> <p>48. Total land area, Sq. Ft. . . . _____</p>
<p>G. PRINCIPAL TYPE OF HEATING FUEL</p> <p>35. <input type="checkbox"/> Gas</p> <p>36. <input type="checkbox"/> Electricity</p> <p>37. <input type="checkbox"/> Other – Specify _____</p>	<p>J. ELEVATOR...</p> <p>Will there be an elevator?</p> <p>42. <input type="checkbox"/> Yes 43. <input type="checkbox"/> No</p>	<p>M. NUMBER OF OFF-STREET PARKING SPACES</p> <p>49. Enclosed. _____</p> <p>50. Outdoors. _____</p>
<p>H. TYPE OF SEWAGE DISPOSAL</p> <p>38. <input type="checkbox"/> Public or private company</p> <p>39. <input type="checkbox"/> Individual (septic tank, etc.)</p>	<p>K. LOW VOLTAGE...</p> <p>Will there be a fire/burglar alarm or lawn sprinkler/irrigation system?</p> <p>44. <input type="checkbox"/> Yes 45. <input type="checkbox"/> No</p>	<p>N. RESIDENTIAL BUILDINGS ONLY</p> <p>51. Number of Bedrooms _____</p> <p>52. Number of Bathrooms. _____</p> <p style="margin-left: 40px;">a. Full _____</p> <p style="margin-left: 40px;">b. Partial _____</p> <p>TOTAL NUMBER OF ROOMS IN HOUSE: _____</p>

IV. IDENTIFICATION – To be completed by all applicants...

1.	Name	Mailing Address – Number, Street, City, State & Zip Code	Phone No.
2.	Contractor		
3.	Architect		

The owner of this building and the undersigned agree to conform to all applicable laws of THE CITY OF GARDENDALE.

Signature of Applicant	Address	Application Date
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DO NOT WRITE IN THIS SPACE – FOR OFFICE USE

Approved By:	Permit Fee	Date Permit Issued	Permit Number
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Building Permit shall expire if no construction work has been performed within [6] months or which has not been completed within one [1] year from date of issuance.

